



Application Data Sheet

Application Information

Application number:: 10/803,784
Filing Date:: March 18, 2004
Application Type:: Regular
Subject Matter:: Utility
Title:: INTERDICTION OF UNAUTHORIZED COPYING
IN A DECENTRALIZED NETWORK

Attorney Docket Number:: 241/5
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 10
Small Entity?: No
Petition included?: No
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES
Status:: Full Capacity
Given Name:: JAMES
Middle Name::
Family Name:: MOORE
City of Residence:: Santa Clara
State or Province of Residence:: California
Country of Residence:: United States
Street of Mailing Address:: 2830 DE LA CRUZ
City of Mailing Address:: SANTA CLARA
State or Province of mailing address:: CA

Country of mailing address:: UNITED STATES
Postal or Zip Code of mailing address:: 95050

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES
Status:: Full Capacity
Given Name:: WILLIAM
Middle Name::
Family Name:: BLAND
City of Residence:: Santa Clara
State or Province of Residence:: California
Country of Residence:: UNITED States
Street of Mailing Address:: 2830 DE LA CRUZ BLVD
City of Mailing Address:: SANTA CLARA
State or Province of mailing address:: CALIFORNIA
Country of mailing address:: UNITED STATES
Postal or Zip Code of mailing address:: 95050

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES
Status:: Full Capacity
Given Name:: SCOTT
Middle Name::
Family Name:: FRANCIS
City of Residence:: SANTA CLARA
State or Province of Residence:: CALIFORNIA
Country of Residence:: UNITED STATES
Street of Mailing Address:: 2830 DE LA CRUZ BLVD
City of Mailing Address:: SANTA CLARA
State or Province of mailing address:: CALIFORNIA
Country of mailing address:: UNITED STATES

Postal or Zip Code of mailing address:: 95050

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES
Status:: Full Capacity
Given Name:: NEIL
Middle Name::
Family Name:: KING
City of Residence:: Santa Clara
State or Province of Residence:: California
Country of Residence:: United States
Street of Mailing Address:: 2830 DE LA CRUZ BLVD
City of Mailing Address:: SANTA CLARA
State or Province of mailing address:: CALIFORNIA
Country of mailing address:: UNITED STATES
Postal or Zip Code of mailing address:: 95051

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES
Status:: Full Capacity
Given Name:: JAMES
Middle Name::
Family Name:: PATTERSON
City of Residence:: SANTA CLARA
State or Province of Residence:: CALIFORNIA
Country of Residence:: UNITED STATES
Street of Mailing Address:: 2830 DE LA CRUZ BLVD
City of Mailing Address:: SANTA CLARA
State or Province of mailing address:: CALIFORNIA
Country of mailing address:: UNITED STATES
Postal or Zip Code of mailing address:: 95050

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES
Status:: Full Capacity
Given Name:: USHA
Middle Name::
Family Name:: SRINIVASAN
City of Residence:: SANTA CLARA
State or Province of Residence:: CALIFORNIA
Country of Residence:: UNITED STATES
Street of Mailing Address:: 2830 DE LA CRUZ BLVD
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State or Province of mailing address:: CALIFORNIA
Country of mailing address:: UNITED STATES
Postal or Zip Code of mailing address:: 95050

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES
Status:: Full Capacity
Given Name:: PAUL
Middle Name::
Family Name:: WIDDEN
City of Residence:: Santa Clara
State or Province of Residence:: CALIFORNIA
Country of Residence:: UNITED STATES
Street of Mailing Address:: 2830 DE LA CRUZ BLVD
City of Mailing Address:: SANTA CLARA
State or Province of mailing address:: CALIFORNIA
Country of mailing address:: UNITED STATES
Postal or Zip Code of mailing address:: 95050

Correspondence Information

Name Line One::	Patent DEPT
Name Line Two::	Macrovision.
Address Line One::	Patent Department
Address Line Two::	
City::	Santa Clara
State or Province::	CA
Postal or Zip Code::	95050
Telephone::	408-562-8424
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Representative Information

Representative Designation::	Representative Number::	Representative Name::
Primary	35668	Jim H Salter
Primary	35973	VICTOR OKUMOTO
Primary	20696	George Almeida
Customer No.		
31665		

Domestic Priority Information

Application::	Continuity Type::	Parent Application	Parent Filing Date
60/514,430	Provisional		10/25/2003
60/518,691	Provisional		11/10/2003
60/528,466	Provisional		12/10/2003

Country::

Application Number::

Assignee Information

MACROVISION CORPORATION

2830 DE LA CRUZ BLVD

SANTA CLARA

CALIFORNIA

UNITED STATES

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